FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

OMB APPROVAL 3235-0076 OMB Number: Expires: April 30, 2008 Estimated average burden

hours per response...... 16.00

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
Prefix Seria					
DATE RECEIVED					

Name of Offering (check if this is an amendment and name has changed, and indicate change.)						
Beroe, Inc. Common Stock Offering						
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) CMA ULOR					
Type of Filing: New Filing Amendment	RECEIVED					
	10 10					
A. BASIC IDENTIFICATION DATA	\ \ 4//^ - \\\					
Enter the information requested about the issuer	3/200					
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Beroe, Inc.	186					
	Telephone Number (Including Area Code)					
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number Parcioung Area Code)					
2054 Kildaire Farm Road, PMB #430, Cary, North Carolina 27518	(919) 647-4721					
Address of Principal Business Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)					
(if different from Executive Offices)						
Brief Description of Business	CED 0.7 com					
	SEP 0 7 2007					
Developing and marketing commodity research	THOMAS					
Type of Business Organization	THOMSON					
☐ corporation ☐ limited partnership, already formed ☐ other (please specification)	(v): FUNANCIAI					
business trust limited partnership, to be formed						
	Month Year					
Actual or Estimated Date of Incorporation or Organization: 1 0 5						
Attendar of Boundard Bure of Inter-portation of 0.82.						
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:						
CN for Canada; FN for other foreign jurisdiction	N C					

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or pinted signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the SEC 1972 (6-02) form displays a currently valid OMB control number:

•									
A. BASIC IDENTIF	ICATION DATA								
2. Enter the information requested for the following:									
 Each promoter of the issuer, if the issuer has been organized 									
 Each beneficial owner having the power to vote or dispose, 	or direct the vote or dispo	sition of, 10% o	r more of a class of						
equity securities of the issuer;									
 Each executive officer and director of corporate issuers and 	of corporate general and r	nanaging partne	ers of partnership						
issuers; and									
 Each general and managing partner of partnership issuers. 									
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or Managing Partner						
			<i>2 2</i>						
Full Name (Last name first, if individual)									
Brunswick, Paul L.									
Business or Residence Address (Number and Street, City, State, Zi	p Code)								
c/o Beroe, Inc., 2054 Kildaire Farm Road, PMB #430, Cary, North Carol	ina 27518								
Check Box(es) that Apply: Promoter Beneficial Owner			☐ General and/or						
· · · · · · · · · · · · · · · · · · ·	_		Managing Partner						
Full Name (Last name first, if individual)									
Dhinagaravel, Amudhanvel									
Business or Residence Address (Number and Street, City, State, Zi	p Code)								
c/o Beroe, Inc., 2054 Kildaire Farm Road, PMB #430, Cary, North Carol	ina 27518								
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or						
			Managing Partner						
Full Name (Last name first, if individual)									
Doggett, Ron E.									
Business or Residence Address (Number and Street, City, State, Zi	n Code)								
c/o Beroe, Inc., 2054 Kildaire Farm Road, PMB #430, Cary, North Carol	•								
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or						
филон 2 от том от то		_	Managing Partner						
			3 3						
Full Name (Last name first, if individual)									
Hakooz, Samir									
Business or Residence Address (Number and Street, City, State, Zi	p Code)		<u> </u>						
c/o Beroe, Inc., 2054 Kildaire Farm Road, PMB #430, Cary, North Caro	ina 27518								
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	□ Director	General and/or						
· · · · · · · · · · · · · · · · · · ·	_		Managing Partner						
Full Name (Last name first, if individual)									
Handfield, Robert									
Business or Residence Address (Number and Street, City, State, Zi	p Code)								
c/o Beroe, Inc., 2054 Kildaire Farm Road, PMB #430, Cary, North Caro	lina 27518								
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	□ Director	General and/or						
			Managing Partner						
Full Name (Last name first, if individual)	······································								
Javidi, Mitch									
Business or Residence Address (Number and Street, City, State, Zi									
c/o Beroe, Inc., 2054 Kildaire Farm Road, PMB #430, Cary, North Carol	ina 27518								
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	☐ General and/or						
·			Managing Partner						
Full Name (Last name first, if individual)									
Reynolds, Donald R.									
Business or Residence Address (Number and Street, City, State, Zi									
c/o Wyrick Robbins Yates & Ponton LLP, 4101 Lake Boone Trail, Suite 300, Raleigh, North Carolina 27607									

В.	INFORMATION	ABOUT	OFFERING

I. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							···· Tes	No				
			Ans	wer also ii	1 Appendix	c, Column	2, if filing	under ULC	E.		_	-
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?							\$ <u>10</u> ,	,000				
3. Does the offering permit joint ownership of a single unit?								Yes ⊠	No			
commis offering with a s persons	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.											
Full Name N/A	(Last name	first, if indi	vidual)									
	r Residence	Address (N	lumber and	Street, City,	State, Zip (Code)			•			
Name of A	ssociated B	roker or De	aler									
States in W	hich Persor	Listed Has	Solicited o	r Intends to	Solicit Purc	hasers					.= .	
(Checl	c "All State:	s" or check	individual S	States) 🔲 🛭	All States							
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[TV]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (Last name first, if individual)												
Business	Business or Residence Address (Number and Street, City, State, Zip Code)											
Name of	Name of Associated Broker or Dealer											
States in	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers											
(Che	ck "All Stat	es" or chec	k individual	States)	All States							
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	e (Last nam	e first, if in	dividual)									
Business	Business or Residence Address (Number and Street, City, State, Zip Code)											
Name of	Associated l	Broker or D	ealer									
States in	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers											
(Check "All States" or check individual States) All States												
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.) C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero". If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$	0		\$ 0
	Equity	\$	500,000.00		\$ 248,661.00
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$	0		\$ 0
	Partnership Interests	\$ \$	0		\$ 0
	Other (Common Stock and a Warrant) Total	\$ \$	500,000.00		\$ 0 \$ 248,661.00
	10141	Ψ	500,000.00		3 240,001.00
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".				
	parenases on the total filles. Effect of it answer is more of zero.		Number of		Aggregate
			Investors		Dollar Amount
	Accredited Investors		10		of Purchases \$ 248,661.00
	Non-accredited Investors		0		\$ 0
	Total (for filings under Rule 504 only)				\$
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		T		D. II.
	Type of Offering		Type of Security		Dollar Amount Sold
	Rule 505		Occurry		\$
	Regulation A				\$
	Rule 504 Total			· · · ·	\$
	1041				. "
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees				\$
	Printing and Engraving Costs Legal Fees				\$
	Accounting Fees				\$
	Administrative, Postage, Secretary Fees				\$
	Sales Commissions (specify finders' fees separately) Other Expenses (identify) State filing fees			⊠ ∐	\$ \$ 350.00
	Total				\$ 5,350.00

	b. Enter the difference between the aggregate offering 1 and total expenses furnished in response to Part C – 6 gross proceeds to the issuer."				\$	494,650.00
5.	Indicate below the amount of the adjusted gross procefor each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of gross proceeds to the issuer set forth in response to Par	purpose is not known, furnish an estimate and f the payments listed must equal the adjusted		Payments to		
	Salaries and fees			Officers, Directors, & Affiliates	무	Payments to Others \$
	Purchase of real estate Purchase, rental or leasing and installation of machi	inery	U	3	. LJ	3
	and equipment			\$		\$
	Construction or leasing of plant buildings and facili			\$. Ц	\$
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets					
	issuer pursuant to a merger)	sor securities or another		\$		\$
	Repayment of indebtedness		ĭ	š ———	Ħ	<u>s</u>
	Working capital		Ħ	Š	\boxtimes	\$ 494,650.00
	Other (specify):			\$		\$
				s		\$
				\$		\$
	Column Totals			\$	\boxtimes	\$ 494,650.00
	Total Payments Listed (column totals added)				94,65	50.00
		D. FEDERAL SIGNATURE				
o	ne issuer has duly caused this notice to be signed llowing signature constitutes an undertaking by quest of its staff, the information furnished by the	the issuer to furnish to the U.S. Securities	es an	d Exchange Co	mmi	ssion, upon writte
	suer (Print or Type) eroe, Inc.	Signature		Date August 30, 200	7	
V	ame of Signer (Print or Type)	Title of Signer (Print or Type)			-	
	onald R. Reynolds	Secretary				

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS



Donald R. Reynolds